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A. Workplace Exposure To Bloodborne Diseases.

1. Introduction

OSHA estimates that more than 300,000 dental health care workers are at risk for exposure to the hepatitis B virus (HBV) and the human immunodeficiency virus (HIV). This booklet will provide guidance in complying with the OSHA standard for *Occupational Exposure to Bloodborne Pathogens*, 29 CFR 1910.1030.

2. Who Is Covered?

This standard covers dentists who work as employees, dental hygienists, dental laboratory technicians, dental assistants, and other dental health care employees who have workplace exposure to bloodborne pathogens. *Workplace exposure* means reasonably anticipated skin, eye, mucous membrane contact, or accidental injection with blood or other bodily fluids which may be contaminated with blood or other potentially infectious material (OPIM) that result during the performance of the employee's duties.

3. What Do I Need To Do?

Under the standard employers are required to develop a written **exposure control plan** to eliminate or minimize employee exposure. The plan must be reviewed and updated annually and have the following key elements:

- An exposure assessment which includes a list of all job classifications and job tasks where there is exposure to blood or to OPIM contaminated with blood.
- A schedule of how and when the provisions of the standard will be implemented including:

- methods of compliance
- hepatitis B vaccination, post-exposure evaluation, and followup
- communicating of hazards to employees through warning signs, labels, and training,
- recordkeeping of medical records and of training records.

4. The Written Exposure Control Plan

a. Exposure Assessment. OSHA requires employers to perform an exposure determination concerning which employees may incur workplace exposure to blood or OPIM. ***Job classification*** refers to a specific job classification in which all employees with this title have occupational exposure (for example, dental hygienist or chair-side assistants would be included in this category). ***Job tasks*** refers to tasks and procedures in which workplace exposure occurs, but employees

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who perform these tasks have other duties which do not have workplace exposure (for example, an employee may have a dual role as a receptionist and a dental assistant).

b. Implementation Schedule

Methods of compliance. Controls must be implemented to control the transmission of HBV and HIV in the dental setting. Personal protective equipment must also be provided where these controls do not eliminate worker exposure to bloodborne diseases. Methods of compliance must include all of the following items:

Universal Precautions. All blood and OPIM (saliva in dentistry) must be treated and handled as if infectious with HBV or HIV.

Engineering Controls. Engineering controls remove or isolate the employee from the hazard. Examples in dentistry include the use of rubber dams, high-speed evacuators, and leakproof puncture resistant labeled containers for contaminated sharp instruments.

Work Practice Controls. Work practices alter the way the work is performed to reduce the potential for exposure. Procedures must be performed to minimize splashing, spraying, or spattering of blood or OPIM. This may be as simple as readjusting the position of the dental chair. Hands should be washed immediately and eyes or other mucous membrane should be immediately flushed after contact with blood or OPIM. Promptly dispose of used needles and sharps without bending, recapping or removing in puncture resistant leakproof labeled containers. Avoid procedures which aerosolize or

splash blood or OPIM. Food or drink must not be stored or handled with blood or OPIM.

Personal Protective Equipment (PPE). Employers must provide, launder at no cost, and ensure that employees wear appropriate PPE during dental procedures. Lab coats and impervious gloves may be appropriate for routine procedures, whereas safety glasses/goggles, face shield, lab coat and gloves may be required for procedures which result in the splashing or spraying of blood or OPIM. The PPE must be maintained in good repair and changed immediately if contaminated.

Housekeeping. Employers must develop scheduled housekeeping and decontamination procedures. All spills and visible contamination must be cleaned/disinfected promptly. Sharps and contaminated waste must be disposed of in puncture resistant, leakproof, labeled, containers (state and local regulations may apply for disposal).

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Hepatitis B vaccination, post-exposure evaluation and follow-up.

As an employer you are required to make the HBV vaccination available to employees at no cost, at a reasonable time/place, within 10 working days of assignment and after an exposure incident. If an employee declines the vaccination, then the employee must sign the following statement of declination.

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Also, you are required to conduct an evaluation following a report of an exposure incident. Any exposure incident must be

immediately reported to you. Post exposure prophylactic treatment, if warranted, must be initiated within 24 hours of exposure. The evaluation must include the source individual, testing of the source individual with consent, the results of serological testing of the exposed employee, post-exposure prophylaxis if medically indicated, and counseling. You must also provide the following information to the healthcare professional attending an exposed employee and request a written opinion: the standard, duties, conditions of exposure, blood testing of source, and relevant medical records.

Communicating hazards to employees.

Labels. Biohazard warning labels must be affixed to containers and equipment containing blood and OPIM. Red bags may be used in lieu of labels.

Training. Employers must provide training annually to employees with workplace exposure prior to initial exposure on the content of the standard, epidemiology and symptoms of bloodborne diseases, methods of transmission of bloodborne diseases, your written exposure control plan, work practices, preventive measures and controls, the HBV vaccination, post-exposure procedures, signs and labeling requirements.

4. Recordkeeping requirements.

As an employer you are required to retain two types of employee-related records: medical records and training records.

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Medical records include hepatitis B vaccination status and medical records associated with an exposure incident. These records must be maintained for 30 years past the last day of employment of the employee.

Training records of each training session which include the date of training, course outline, trainer's name and qualifications, and names of all attending must be maintained for three years.

B. What Other Standards Apply?

1. Utah OSHA Poster and Log Requirements.

Job Safety and Health Poster:

A copy of this poster must be posted in the workplace. The poster describes employer and employee responsibilities, discrimination, and inspection procedures under the Utah Code.

OSHA Form 200:

If you have 11 or more employees, you are required to maintain a log of occupational related injuries and illnesses.

Posters and forms are available from Utah OSHA by calling (801) 530-6901.

2. Hazard Communication

The purpose of the hazard communication regulation is to ensure that information pertaining to hazardous chemicals is transmitted to employees through a comprehensive written program which includes provisions for chemical labeling, material safety data sheets, and employee training. If your employees handle chemicals such as dental amalgams and sealants regulation 29 *CFR 1910.1200* applies to you.

3. General Safety

In the interest of general safety OSHA standards require that workplaces be maintained clean and free from clutter. Electrical equipment must be maintained in good working order. A floorplan should be posted identifying exits, and a meeting place outside the building, in the event of an emergency evacuation. Fire extinguishers must be inspected annually and maintained in a readily accessible location to aid evacuation from the building in the case of a fire.

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C. Latex Allergies

The National Institute for Occupational Safety and Health (NIOSH) reports that work-related allergic reactions to latex have increased in recent years, especially among employees in the growing health-care industry including dental personnel. Studies indicate that 8-12% of health-care workers regularly exposed to latex are sensitized, compared with 1-6% of the general population.

NIOSH recommends the following practices in the prevention of latex allergies:

1. If you choose latex gloves, use powder-free gloves with reduced protein content.

2. When wearing latex gloves, do not use oil-based hand creams or lotions unless they have been shown to reduce latex-related problems.

3. Frequently clean work areas contaminated with latex dust (upholstery, carpets, ventilation ducts, and plenums).

4. Learn to recognize the symptoms of latex allergy: skin rashes; hives; flushing; itching; nasal, eye, or sinus symptoms; asthma; and shock.

5. If you develop symptoms of latex allergy, avoid direct contact with latex gloves and products until you can see a physician experienced in treating latex allergy.

6. If you have latex allergy consult your physician regarding the following precautions:

Avoid contact with latex gloves and products.

Avoid areas where you might inhale the powder from latex gloves worn by others.

Tell your employer, physician, nurses, and dentist that you have latex allergy.

Wear a medical alert bracelet.

D. References

"Occupational Exposure to Bloodborne Pathogens," *Title 29 CFR 1910.1030, Federal Register 56(235): 64004-64182, December 6, 1991.*

"Controlling Occupational Exposure to Bloodborne Pathogens in Dentistry," *U.S. Department of Labor, Occupational Safety and Health Administration, Publication 3129, 1992.*

"Hazard Communication," *Title 29 CFR 1910.1200, Federal Register 59(6170), February 9, 1994.*

"Latex Allergy" *NIOSH Facts*, June, 1997 (<http://www.cdc.gov/niosh/latexfs.html>)

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APPENDIX 1

BLOODBORNE - PATHOGEN EXPOSURE - CONTROL - PLAN

For Compliance With OSHA Standard

29 CFR 1910.1030

and

UOSHA General Rules and Regulations

BLOODBORNE PATHOGENS

EXPOSURE CONTROL PLAN

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This material was compiled by the staff of the UOSHA.

Note: this sample plan is provided only as a guide to assist in complying with 29 CFR 1910.1030, OSHA's Bloodborne Pathogens standard. It is not intended to supersede the requirements detailed in the standard. Employers should review the standard for particular requirements which are applicable to their specific situation. It should be noted that this model program does not include provisions for HIV/HBV laboratories and research facilities which are addressed in section (e) of the standard. Employers operating these laboratories need to include provisions as required by the standard. Employers will need to add information relevant to their particular facility in order to develop an effective, comprehensive exposure control plan. Employers should note that the exposure control plan is expected to be reviewed at least on an annual basis and updated when necessary.

The information contained in this document is not considered a substitute for any provision of the standard.

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

Facility Name: _____

Date of Preparation: _____

In accordance with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, the following exposure control plan has been developed:

A. Purpose

The purpose of this exposure control plan is to:

- 1. Eliminate or minimize employee occupational exposure to blood or certain other body fluids;**
- 2. Comply with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030.**

B. Exposure Determination

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e. employees are considered to be exposed even if they wear personal protective equipment). This exposure determination is required to list all job classifications in which all employees may be expected to incur such occupational exposure, regardless of frequency. At this facility the following job classifications are in this category:

(list job classifications) _____

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur

exposure to blood or other potentially infectious materials, task or procedures that would cause these employees to have occupational exposure are also required to be listed in order to clearly understand which employees in these categories are considered to have occupational exposure. The job classifications and associated tasks for these categories are as follows (*or place in appendix*):

<u>Job Classification</u>	<u>Task/Procedure</u>

C. Implementation Schedule and Methodology

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement:

1. Compliance Methods

Universal precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized. At this facility the following engineering controls will be utilized: *(list controls, such as sharps containers, biosafety cabinets, etc.)*

The above controls will be examined and maintained on a regular schedule. The schedule for reviewing the effectiveness of the controls is as follows: *(list schedule such as daily, once/week, etc. as well as list who has the responsibility to review the effectiveness of the individual controls, such as the supervisor for each department, etc.)*

Handwashing facilities shall be made available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure. *(If handwashing facilities are not feasible, the employer is required to provide*

either an antiseptic cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. If these alternatives are used then the hands are to be washed with soap and running water as soon as feasible. Employers who must provide alternatives to readily accessible handwashing facilities should list the location, tasks, and responsibilities to ensure maintenance and accessibility of these alternatives.)

_____ *(insert name of position/person, e.g. supervisors)* shall ensure that after the removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.

_____ *(insert name of position/person, e.g. supervisors)* shall ensure that if employees incur exposure to their skin or mucous membranes then those areas shall be washed or flushed with water as soon as feasible following contact.

2. Needles

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken. OSHA allows an exception to this if the procedure would require that the contaminated needle be recapped or removed and no alternative is feasible and the action is required by the medical procedure. If such action is required then the recapping or removal of the needle must be done by the use of a mechanical device or a one-handed technique. At this facility recapping or removal is only permitted for the following procedures: *(List the procedures and also list the mechanical device to be used or alternately if a one-handed technique will be used.)*

3. Containers for REUSABLE Sharps

Contaminated sharps that are reusable are to be placed immediately, or as soon as possible, after use into appropriate sharps containers. At this facility the sharps containers are puncture resistant, labeled with a biohazard label and are leak proof. *(Employers should list here where reusable sharps containers are located as well as who has responsibility for removing sharps from containers and how often the containers will be checked to remove the sharps.)*

4. Work Area Restrictions

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

All procedures will be conducted in a manner which will minimize splashing, spraying, splattering,

and generation of droplets of blood or other potentially infectious materials. Methods which will be employed at this facility to accomplish this goal are: *(List methods, such as covers on centrifuges, usage of dental dams if appropriate, etc.)*

5. Specimens

Specimens of blood or other potentially infectious materials will be placed in a container which prevents leakage during the collection, handling, processing, storage, and transport of the specimens.

The container used for this purpose will be labeled or color coded in accordance with the requirements of the OSHA standard. *(Employers should note that the standard provides for an exemption for specimens from the labeling/color coding requirement of the standard provided that the facility utilizes universal precautions in the handling of all specimens and the containers are recognizable as containing specimens. This exemption applies only while the specimens remain in the facility. If the employer chooses to use this exemption then it should be stated here.*

_____)

Any specimens which could puncture a primary container will be placed within a secondary container which is puncture resistant.

If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container which prevents leakage during the handling, processing, storage, transport, or shipping of the specimen.

6. Contaminated Equipment

_____ (*insert name of position/person*) is responsible for ensuring that equipment which has become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible. Equipment not decontaminated shall be tagged / labeled.

7. Personal Protective Equipment

PPE Provision

_____ (*insert name of position/person*) is responsible for ensuring that the following provisions are met.

All personal protective equipment used at this facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used. (*Indicate how clothing will be provided to employees, e.g. who has responsibility for distribution. You could also list which procedures would require the protective clothing and the recommended type of protection required, this could also be listed as an appendix to this program.*)

PPE Use

_____ (*insert name of position/person*) shall ensure that the employee uses appropriate PPE unless the supervisor shows that employee temporarily and briefly declined to use PPE when under rare and extraordinary circumstances, it was the employee's professional judgement that in the specific instance its use would have prevented the delivery of healthcare or posed an increased hazard to the safety of the worker or co-worker. When the employee makes this judgement, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

PPE Accessibility

_____ (*insert name of position/person*) shall ensure that appropriate PPE in the appropriate sizes is readily accessible at the work site or is issued without cost to employees. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

PPE Cleaning, Laundering and Disposal

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to the employees. All repairs and replacements will be made by the employer at no cost to

employees.

All garments which are penetrated by blood shall be removed immediately or as soon as feasible. All ppe will be removed prior to leaving the work area.

When PPE is removed, it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

Gloves

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes; when performing vascular access procedures and when handling or touching contaminated items or surfaces. Disposable gloves used at this facility are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

Eye and Face Protection

Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, splatters, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated. Situations at this facility which would require such protection are as follows:

Additional Protection

Additional protective clothing (such as lab coats, gowns, aprons, clinic jackets, or similar outer garments) shall be worn in instances when gross contamination can reasonably be anticipated (*such as autopsies and orthopedic surgery*). The following situations require that such protective clothing be utilized:

8. Housekeeping

This facility will be cleaned and decontaminated according to the following schedule: (*list area and schedule*)

AREA Schedule Cleaner

Decontamination will be accomplished by utilizing the following materials: *(list the materials which will be utilized, such as bleach solutions or EPA registered germicides)*

All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or other potentially infectious materials, as well as the end of the work shift if the surface may have become contaminated since the last cleaning. *(Employers should add in any information concerning the usage of protective coverings, such as plastic wrap which they may be using to assist in keeping surfaces free of contamination.)*

All bins, pails, cans, and similar receptacles shall be inspected and decontaminated on a regularly

scheduled basis (*list frequency _____ and by position/person _____*)

Any broken glassware which may be contaminated will not be picked up directly with the hands.

Reusable sharps that are contaminated with blood or other potentially infectious materials shall not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.

9. Regulated Waste Disposal

Disposable Sharps

Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are closable, puncture resistant, leak proof on sides and bottom and labeled or color coded.

During use, containers for contaminated sharps shall be easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found (e.g., laundries).

The containers shall be maintained upright throughout use and replaced routinely and not be allowed to overfill.

When moving containers of contaminated sharps from the area of use, the containers shall be closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

The container shall be placed in a secondary container if leakage of the primary container is possible. The second container shall be closeable, constructed to contain all contents and prevent leakage during handling, storage and transport, or shipping. The second container shall be labeled or color coded to identify its contents.

Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury.

Other Regulated Waste

Other regulated waste shall be placed in containers which are closeable, constructed to contain all contents and prevent leakage of fluids during handling, storage, transportation or shipping.

The waste must be labeled or color coded and closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

NOTE: Disposal of all regulated waste shall be in accordance with applicable Federal, State, and

Local regulations.

10. Laundry Procedures

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will be placed in appropriately marked (biohazard labeled, or color coded red bag) bags at the location where it was used. Such laundry will not be sorted or rinsed in the area of use.

Please note: If your facility utilized Body Substance Isolation or Universal Precautions in the handling of all soiled laundry (i.e. all laundry is assumed to be contaminated) no labeling or color-coding is necessary if all employees recognize the hazards associated with the handling of this material.

Laundry at this facility will be cleaned at _____.

Please note: If your facility ships contaminated laundry off-site to a second facility which does not utilize Universal Precautions in the handling of all laundry, contaminated laundry must be placed in bags or containers which are labeled or color-coded. One possible solution would be to include a requirement in the contract laundry scope of work requiring the laundry to utilize the equivalent of Universal Precautions.

11. Hepatitis B Vaccine and Post-Exposure Evaluation and Follow-Up

General

The (*insert company name*) _____ shall make available the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post exposure follow-up to employees who have had an exposure incident.

The (*insert position/person*) _____ shall ensure that all medical evaluations and procedures including the Hepatitis B vaccine and vaccination series and post exposure follow-up, including prophylaxis are:

- a) Made available at no cost to the employee;**
- b) Made available to the employee at a reasonable time and place;**
- c) Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and**
- d) Provided according to the recommendations of the U.S. Public Health Service.**

All laboratory tests shall be conducted by an accredited laboratory at no cost to the employee.

Hepatitis B Vaccination

_____ *(insert name of position/person)* is in charge of the Hepatitis B vaccination program. *(Where appropriate: We contract with _____ to provide this service.)*

Hepatitis B vaccination shall be made available after the employee has received the training in occupational exposure (see information and training) and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete Hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

Participation in a pre-screening program shall not be a prerequisite for receiving Hepatitis B vaccination.

If the employee initially declines Hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, the vaccination shall then be made available.

All employees who decline the Hepatitis B vaccination offered shall sign the OSHA required waiver indicating their refusal.

If a routine booster dose of Hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster doses shall be made available.

Post Exposure Evaluation and Follow-up

All exposure incidents shall be reported, investigated, and documented. When the employee incurs an exposure incident, it shall be reported to *(list who has responsibility for investigation of exposure incidents)*: _____

Following a report of an exposure incident, the exposed employee shall immediately receive a confidential medical evaluation and follow-up, including at least the following elements:

a) Documentation of the route of exposure, and the circumstances under which the exposure incident occurred;

b) Identification and documentation of the source individual, unless it can be established that identification is infeasible or prohibited by state or local law. *(Employers may need to modify this provision in accordance with applicable local laws on this subject. Modifications should be listed here: _____)*

c) The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the *(insert name of position/person)* _____ shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.

- d) When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.**
- e) Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.**

Collection and testing of blood for HBV and HIV serological status will comply with the following:

- a) The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained;**
- b) The employee will be offered the option of having their blood collected for testing of the employees HIV/HBV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological status.**

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard. All post exposure follow-up will be performed by *(insert name of clinic, physician, department)* _____.

Information Provided TO the Healthcare Professional

The *(insert name of position/person)* _____ shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided with the following:

- a) A copy of 29 CFR 1910.1030; (*While the standard outlines the confidentiality requirements of the health care professional, it might be helpful for the employer to remind that individual of these requirements.*)**
- b) A written description of the exposed employee's duties as they relate to the exposure incident;**
- c) Written documentation of the route of exposure and circumstances under which exposure occurred;**
- d) Results of the source individuals blood testing, if available; and**
- e) All medical records relevant to the appropriate treatment of the employee including vaccination status.**

Healthcare Professional's Written Opinion

The *(insert name of position/person)* _____ shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.

The healthcare professionals written opinion for HBV vaccination shall be limited to whether HBV vaccination is indicated for an employee, and if the employee has received such vaccination.

The healthcare professional's written opinion for post exposure follow-up shall be limited to the following information:

- a) A statement that the employee has been informed of the results of the evaluation; and**

- b) A statement that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.**

Note: All other findings or diagnosis shall remain confidential and shall not be included in the written report.

12. Labels and Signs

_____ (*insert name of position/person*) shall ensure that biohazard labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious materials, and other containers used to store, transport or ship blood or other potentially infectious materials.

The universal biohazard symbol shall be used. The label shall be fluorescent orange or orange-red.

Red bags or containers may be substituted for labels. However, regulated wastes must be handled in accordance with the rules and regulations of the organization having jurisdiction.

Blood products that have been released for transfusion or other clinical use are exempted from these labelling requirements.

13. Information and Training

_____ (*insert name of position/person*) shall ensure that training is provided at the time of initial assignment to tasks where occupational exposure may occur, and that it shall be repeated within twelve months of the previous training. Training shall be tailored to the education and language level of the employee, and offered during the normal work shift. The training will be interactive and cover the following:

a) A copy of the standard and an explanation of its contents;

- b) A discussion of the epidemiology and symptoms of bloodborne diseases;**
- c) An explanation of the modes of transmission of bloodborne pathogens;**
- d) An explanation of the _____ (*insert company name*) Bloodborne Pathogen Exposure Control Plan (this program), and a method for obtaining a copy.**
- e) The recognition of tasks that may involve exposure.**
- f) An explanation of the use and limitations of methods to reduce exposure, for example engineering controls, work practices and personal protective equipment (PPE).**
- g) Information on the types, use, location, removal, handling, decontamination, and disposal of PPEs.**
- h) An explanation of the basis of selection of PPEs.**
- i) Information on the Hepatitis B vaccination, including efficacy, safety, method of administration, benefits, and that it will be offered free of charge.**

j) Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.

k) An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow-up.

l) Information on the evaluation and follow-up required after an employee exposure incident.

m) An explanation of the signs, labels, and color coding systems.

The person conducting the training shall be knowledgeable in the subject matter.

Employees who have received training on bloodborne pathogens in the twelve months preceding the effective date of this policy shall only receive training in provisions of the policy that were not covered.

Additional training shall be provided to employees when there are any changes of tasks or procedures affecting the employee's occupational exposure.

14. Recordkeeping

Medical Records

_____ (*insert name of position/person*) is responsible for maintaining medical records as indicated below. These records will be kept (*insert location*)

_____. (*If you contract for post exposure follow-up and Hepatitis B vaccination evaluation, make sure that your contract language includes provisions for recordkeeping which are consistent with the requirements of 1910.20.*)

Medical records shall be maintained in accordance with OSHA Standard 29 CFR 1910.20. These records shall be kept confidential, and must be maintained for at least the duration of employment plus 30 years. The records shall include the following:

- a) The name and social security number of the employee.
- b) A copy of the employee's HBV vaccination status, including the dates of vaccination.
- c) A copy of all results of examinations, medical testing, and follow-up procedures.

d) A copy of the information provided to the healthcare professional, including a description of the employee's duties as they relate to the exposure incident, and documentation of the routes of exposure and circumstances of the exposure.

Training Records

_____ (*insert name of position/person*) is responsible for maintaining the following training records. These records will be kept (*insert location*) _____.

Training records shall be maintained for three years from the date of training. The following information shall be documented:

- a) The dates of the training sessions;**
- b) An outline describing the material presented;**
- c) The names and qualifications of persons conducting the training;**
- d) The names and job titles of all persons attending the training sessions.**

Availability

All employee records shall be made available to the employee in accordance with 29 CFR 1910.20.

All employee records shall be made available to the Assistant Secretary of Labor for the Occupational Safety and Health Administration and the Director of the National Institute for Occupational Safety and Health upon request.

Transfer of Records

Of this facility is closed or there is no successor employer to receive and retain the records for the prescribe period, the Director of the NIOSH shall be contacted for final disposition.

15. Evaluation and Review

_____ (*insert name of position/person*) is responsible for annually reviewing this program, and its effectiveness, and for updating this program as needed.

16. Dates

All provisions required by this standard will be/were implemented by July 30, 1992.

17. Outside Contractors

While the written exposure control plan does not have to address information obtained from and provided to outside contractors, you may wish to establish standard operating procedures for these situations and append them to this document.

APPENDIX 2

SAMPLE - WRITTEN

HAZARD
COMMUNICATION
GUIDELINES/PROGRAM

For Compliance With

UOSH General Rules and Regulations

This material was compiled by the staff of UOSHA.

NOTE: This sample plan is provided only as a guide to assist in complying with UOSHA's General Rules and Regulations. It is not intended to supersede the requirements detailed in the standards. Employers should review the standard for particular requirements which are applicable to their specific situation. Employers will need to add information relevant to their particular facility in order to develop an effective program. Employers should note that certain programs are expected to be reviewed at least on an annual basis and updated when necessary.

The information contained in this document is not considered a substitute for any provision of the standard.

GUIDE TO COMPLIANCE WITH THE HAZ-COM STANDARD

The Hazard Communication Standard applies to virtually all commercial workplaces where employees use or may be exposed to hazardous chemicals. The standard requires an evaluation of the hazards of any chemical which is known to be present in the workplace in such a manner that employees may be exposed under normal conditions of use or in a foreseeable emergency, and that this hazard information and protective measures be transmitted to the employees who are exposed to the chemicals. The following (and also Appendix E of the standard) is a guide to use in developing the four major areas which must be included in the hazard communication program. **You must refer to the hazard communication standard for all specific requirements of the program.**

1. Written Program. Employers must prepare a written hazard communication program for their workplaces which at least describes how the criteria specified for labels and warnings, material safety data sheets, and employee information and training will be met. The written program must be made available to employees upon request, and will be one of the first things an OSHA inspector will want to see. Also include in the written program:

* **Responsible Person.** Identify by job title who has the responsibility for maintaining the program, the MSDS sheets, conduct training, etc.

* **Hazardous Chemicals List.** Survey the workplace(s) and identify all of the hazardous chemicals in use. Look for label information such as "DANGER", "WARNING", OR "CAUTION" on the product. Prepare a list of all the chemical products which could be considered hazardous. This list must use an identity of the chemical that is cross-referenced on the MSDS. OSHA's recommendation is that this list be alphabetical (by department if desired) and that the MSDS file be maintained in the same order. This will help in locating a particular MSDS when time is of essence.

* **Non-Routine Tasks.** The program must include methods employers will use to inform employees of the hazards of non-routine tasks (for example, the cleaning of tanks or other vessels) where a person could be exposed to a hazardous chemical.

2. **MSDS File.** Material Safety Data Sheets provide a wealth of important information on each particular chemical or product. Prepare a file of MSDSs for the hazardous products (a three ring binder works great). If you do not have an MSDS for a particular product, request one from your supplier - they must provide you with one (it works best if you request the MSDS when you order the product).

3. **Container Labeling.** All containers of hazardous chemicals that you purchase or receive should already be labeled. The label must include appropriate hazard warnings. Be sure that you label/mark any containers which you fill from larger containers during the work process, i.e., spray bottles or use containers, or any waste containers. This labeling requirement does not include containers filled and used by the same person during one work shift. But its always best to label all containers to avoid mixups.

4. **Employee Information And Training.** All employees will be provided with information and training on this program and hazardous chemicals present in their work area. Any new employee must be trained at the time of their initial assignment (before starting to work with hazardous chemicals), and any affected employee must have a training update whenever a new hazard is introduced into their work area. Employee training must cover at least:

- * The provisions of the hazard communication standard. The location and availability of the written hazard communication program, chemical listing, and the MSDS file.

- * Which operations and products are hazardous, and what are the physical and health hazards.

- * What controls are in place to protect them; what they should do to protect themselves; and what personal protective equipment to use when working with these products.

- * Methods and observations that are in place or may be used to detect the presence or release of a hazardous chemical in their workplace.

- * What the MSDS is and how to get information from it. Information found in MSDSs, in addition to the identity and preparation date, generally includes:

- ** The chemical name and ingredients in its makeup;

- ** Physical and chemical characteristics of the chemical, such as the flash point, caustic or acid, boiling point, etc;

- ** Physical hazards and/or health hazards;

- ** Primary routes of entry into the body, i.e., inhalation, eyes, skin, etc;
- ** OSHA's Permissible Exposure Limit, or ACGIH's Threshold Limit Value;
- ** Precautions for safe handling, use, etc;
- ** Work & engineering controls; Personal protective equipment to be used;
- ** Emergency & first aid procedures;
- ** Manufacturer's name, address, & telephone number.

Application: The Hazard Communication Program **does not apply to:** (Exemptions are qualified. See the hazard communication standard for more definitive discussion in each area.)

* Any hazardous waste as defined by the Solid Waste Disposal Act when subject to EPA regulations; or any hazardous substance as defined by CERCLA when it is the focus of remedial or removal action under CERCLA in accordance with EPA regulations.

* Tobacco or tobacco products;

- * Wood or wood products, including lumber which will not be processed, when the only hazard is the potential for flammability or combustibility;

- * Articles (see definition in the standard);

- * Food, drug, cosmetics, or alcoholic beverages in a retail establishment which are packaged for sale, or intended for personal consumption by employees while in the work place;

- * Any consumer product or hazardous substance as defined by the Consumer Product Safety Act or Federal Hazardous Substance Act, where the employer can demonstrate it is used in the workplace for the purpose intended, and the use results in a duration and frequency of exposure which is not greater than exposures experienced by consumers. Examples are toilet bowl cleaner, window cleaner, engine starter.

SAMPLE PROGRAM (Attached)

The attached sample program is provided as a guide to assist you in developing a hazard communication program for your business. It is not intended to supersede the requirements detailed in the standard. You must review the standard for particular requirements which are applicable to your specific situation. You need to add information relevant to your particular company in order to develop an effective program.

HAZARD COMMUNICATION PROGRAM

GENERAL

The following written hazard communication program has been established for _____ (name of company). This program, a listing of hazardous chemicals, and material safety data sheets (MSDS), will be available at _____ (location) for review by all employees.

POLICY

Education and training will be provided for all employees who may be or potentially may be exposed to hazardous chemicals in the work place. The training will be conducted prior to first exposure to the chemical (during on-the-job orientation and training) and whenever a new hazardous chemical is introduced into the work place. All employees will be informed of the location of the written hazard communication program, chemical listing, and MSDSs.

CONTAINER LABELING

The _____ (job title or responsible party) will verify that all containers received for and used by this company are clearly labeled as to the contents and the appropriate hazard warnings. No containers will be released for use until the above data is verified.

Existing labels on incoming containers of hazardous chemicals will not be removed or defaced, unless the container is immediately marked with the required information.

DOT shipping labels on containers will not be removed until all residue has been removed from the container.

All employees who transfer hazardous chemicals into portable containers (such as bottles, spray bottles, parts cleaning cans, etc) will ensure the containers are appropriately labeled and the contents identified.

LIST OF HAZARDOUS CHEMICALS

A list which identifies current hazardous chemicals present in the work place will be maintained, updated, and periodically reviewed. The list is cross-referenced to the MSDSs. It is kept with this program and MSDSs, and serves as an index to aid employees in identifying and locating necessary information.

MATERIAL SAFETY DATA SHEETS

It is the responsibility of the _____ (job title or responsible party) to obtain necessary MSDSs for hazardous materials so a comprehensive MSDS file can be maintained. MSDS will be maintained in current status.

Copies of the MSDSs for all hazardous chemicals to which employees may be exposed will be kept at _____ (location) and will be readily available for review to all employees during each workshift.

Subcontractors working on the jobsite are required to bring copies of all MSDSs for hazardous materials they are bringing on the jobsite to the employer's office so the information is accessible to all employees. It is preferable to have each subcontractor bring their hazardous communication program and MSDSs in a binder labeled with the contractor's name and identified as a hazardous communication program. Upon leaving the jobsite and the removal of all hazardous materials, they may take their information with them.

A recommendation is for employees to take a copy of the applicable MSDSs to the medical facility if emergency treatment is necessary due to exposure.

INFORMATION AND TRAINING

Employees will be provided information on these training requirements, any operations in their work area where hazardous chemicals are present, and the location of the written hazard communication program, chemical listing, and material safety data sheets.

Training may be either in the classroom or on-the-job, and presented prior to first exposure to the hazardous material. Information and training may be designed to cover categories of hazards (flammability) or specific chemicals. Chemical-specific information must always be available through labels and MSDSs. Attendance should be documented.

Employee training will include at least the following:

- * Methods and observations that are in place or may be used to detect the presence or release of a hazardous chemical in the work area;
- * The physical and health hazards of the chemicals in the work area;
- * The measures employees can take to protect themselves from the hazards, such as in place work practices, emergency procedures, and personal protective equipment to be used;
- * Details of the hazard communication program, including the labeling system.
- * Material safety data sheets, and how employees can obtain and use the appropriate hazard information.
- * If an employee is instructed to use a hazardous material for which he/she has not been trained, it will be their responsibility to inform the employer prior to handling such material, so proper training can be given.

NON-ROUTINE HAZARDOUS TASKS

Since many tasks are not done on a routine basis (for example, boiler cleanout or replacing hazardous chemical piping), they will be handled through specific pre-task actions and training. Before performing non-routine tasks, the supervisor in charge will review applicable MSDSs; instruct employees in the associated hazards and recommended first aid treatment; and assure all essential personal protective and emergency equipment is available and operational. He or she will notify all other employees working in this area that non-routine tasks are scheduled or being performed.

SUB-CONTRACTORS AND OTHER EMPLOYEES

Any contractors working in the company's facilities or jobsite will be informed of the written hazardous material program and where to locate MSDSs. It will be the responsibility of that employer to properly train his employees in the avoidance or emergency procedures for these materials.

SAMPLE PROGRAM NUMBER 2

WRITTEN HAZARD COMMUNICATION PROGRAM

GENERAL INFORMATION

In order to comply with **OSHA** General 1200 & Construction 1926.59, Hazard Communication, **the following written Hazard Communication Program has** been established for (_____).

All work units of the company are included within this program. The written program will be available in the (_____) for review by any interested employee.

Container Labeling

The(_____) will verify that all containers received for use will:

1-Be clearly labeled as to the contents.

2-Note the appropriate hazard warning.

3-List the name and address of the manufacturer-

The (_____) will insure that all secondary containers are label with either an extra copy of the original manufacturer's label, or with generic labels.

B.Material Safety, Data Sheets (MSDS)

The (_____) will be responsible for obtaining and maintaining the data sheet system for the company.

The(_____) will review incoming data sheets for new and significant health/safety information. He/She will see that any new information is passed on to the affected employees. (If alternatives to actual data sheets are used, a description of the system will be provided). Copies of MSDS's for all hazardous chemicals to which employees of this company may be exposed will be kept in the(_____).

MSDS's will be available to all employees in their work area for review during each work shift.

If **MSDS's** are not available, or new chemicals in use do not have MSDS's immediately contact (_____).

Employee Training and Information

The (_____) is responsible for the employee training program- He/She will ensure that all elements specified below are carried out. Prior to starting work each new employee of (_____) will attend a health and safety orientation and will receive information and training on the following:

1-An overview of the requirements contained in the Hazard Communication Standard.

2-Chemicals present in their workplace operations.

3-Location and availability of our written hazard program.

4-Physical and health effects of the hazardous chemicals.

5-Methods and observation techniques used to determine the presence or release of hazardous chemicals in the work area.

6-How to lessen or prevent exposure to these hazardous chemicals through usage of control work practices and personal protective equipment.

7-Steps the company has taken to lessen or prevent exposure to these chemicals.

8-How to read labels and review MSDS's to obtain appropriate hazard information.

9-Location of MSDS file and location of hazardous chemical list.

10. Information & training on the Hazards of non-routine tasks will be completed by (_____),

before the task is undertaken.

Prior to a new chemical hazard being introduced into any section of this company, each employee of that section will be given information as outlined above.

The(_____) is responsible for ensuring that MSDS's on the *new* chemicals are available.